

# Application for Exemption or Remission of LPA/EPA Application Fees

LPA120A

## Section 1 - About the case

Donor's full name

Donor's address

Case number/ref. (if known)

*You will find this on our letters*

Which fee does this application relate to?

LPA application fee

EPA application fee

Repeat LPA application fee

Which powers of attorney have you enclosed for registration?

LPA for health and welfare

LPA for property and financial affairs

EPA

## Section 2 - About you

What is your relationship to the case?

Donor     Attorney     Other (Please specify)

Title

Mr     Mrs     Miss     Ms     Other

First name

Last name

Address (including postcode)

Telephone number

Daytime  Mobile

Email address

If you have already paid the fee, who do you want the money paid to if your application for exemption/remission is successful?

continued overleaf ►

### Section 3 - Fee exemption based on permitted benefits

**3a** Does the donor receive any of the benefits listed?

- Income Support
- Income-based Employment and Support Allowance
- Income-based Jobseeker's Allowance
- **Guarantee Credit element of State Pension Credit**
- Housing Benefit
- Council Tax Reduction/Support - also known by other names (not the 25% single person discount or the Class U exemption)

- Local Housing Allowance
- A combination of Working Tax Credit and **at least one of:**
  - Child Tax Credit
  - Disability Element of Working Tax Credit
  - Severe Disability Element of Working Tax Credit

**Not included:** Disability Living Allowance, Invalidation Benefit, Personal Independence Payment

Yes ► **Go to question 3b**

No ► **Go to Section 4**

**3b** Has the donor been awarded personal injury damages of more than £16,000 which were ignored when the donor was assessed for the benefit listed at question 3a?

Yes ► **Go to Section 4**

No. The donor is eligible for exemption.

### Section 4 - Fee remission based on gross annual income or Universal Credit

Is the donor's gross annual income less than £12,000?

Yes, I want to apply for a remission of 50% of the fee based on the donor's gross annual income.

► **Evidence must be enclosed.**

No

Does the donor receive Universal Credit?

Yes, I want to apply for a remission based on the donor receiving Universal Credit.

► **Evidence must be enclosed.**

No

### Section 5 - Declaration

I declare that the information I have given is true to the best of my knowledge and I enclose the required evidence to support the claim for a fee exemption or remission.

I understand that this application will be refused if I fail to provide evidence.

Signature

Date

**Send your completed application to:**

Office of the Public Guardian, PO Box 16185, Birmingham B2 2WH

**or**

DX 744240 Birmingham 79